UNITED STATES PATENT & TRADEMARK OFFICE Washington, D.C. 20231

REQUEST FOR PATENT FEE REFUND							
1 Date of Request: 2 Serial/Pate 1 7521085							
3 Please refund the following fee	e(s):	4 PAP NUM	ER IBER	5	DATE FILED	6 AMOUNT	
Filing						\$	
Amendment						\$	
Extension of Time						\$	
Notice of Appeal/Appeal						\$	
Petition					, , , , ,	\$	
Issue						\$	
Cert of Correction/Terminal Disc.						\$	
Maintenance						\$	
Assignment			-			\$	
Other						\$	
		7 TOTAL AMOUNT OF REFUND \$					
		s TO BE REFUNDED BY:					
10 REASON:		Treasury Check					
Overpayment			(Cred	it Depo	osit A/C #:	
Duplicate Payment			9				
No Fee Due (Explanation):	,						
11 REFUND REQUESTED BY:							
TYPED/PRINTED NAME:				TITL			
SIGNATURE:			URHEN71738 Make/Humber:18521985 FU: 9284 \$580.88 CR				
OFFICE: 10: 9284							
THIS SPACE RESERVED FOR FINANCE USE ONLY:							
APPROVED: DATE:							

Instructions for completion of this form appear on the back. After completion, attach white and yellow copies to the official file and mail or hand-carry to:

Office of Finance Refund Branch Crystal Park One, Room 802B

PORM PTO 1577 (01/90)